

284129

**Fax**

Date:

1-9-2015

From:

Geroneil Weston, Master Care NEM, LLC

Phone:

803-673-0005

To:

S.C. office of Regulatory Staff, Transportation Dept.

Phone:

Fax:

737-0815

**RECEIVED**

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No. of pages (including cover):

3

**TRANS DEPT**

Comments:

☐ Urgent ☐ For Review ☐ Please Comment ☐ Please Reply ☒ Please Recycle

**STATE OF SOUTH CAROLINA****(Caption of Case)**

Example: Application for a Class C Charter Certificate from  
John Doe dba Doe's Limo

**CLASS C NON-EMERGENCY**

**MASTER CARE  
NON-EMERGENCY MEDICAL  
TRANSPORTATION, LLC**

**BEFORE THE  
PUBLIC SERVICE COMMISSION  
OF SOUTH CAROLINA**

**TRANSPORTATION COVER SHEET****DOCKET**

**NUMBER:** 2014 - 288 - T

If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.

(Please type or print)

**Submitted by:** Garonell Weston

**Telephone:** 803-673-0005

**Address:** 848 Toms Creek Road

**Fax:**

Hopkins, SC 29061

**Other:**

**Email:** gowbusiness63@gmail.com

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

er papers  
and must

**NATURE OF ACTION (Check all that apply)**

☐ Application - Class C Taxi

☐ Application - Class C Charter

☐ Application - Class C Charter Bus

☐ Application - Class C Non-Emergency

☐ Application - Class B Household Goods

☐ Application - Class B Hazardous Waste

☐ Application

☒ Request for Extension to Comply with Order

☐ Request for Order Granting Authority to Obtain Certificate of Public Convenience and Necessity to Be Rescinded

☐ Request for Cancellation of Certificate

☐ Request for Suspension

☐ Request for Reinstatement

☐ Request for Name Change on Certificate

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☐ Request to Amend Scope of Authority

☐ Request to Amend Tariff (rate increase, etc.)

☐ Request to Amend Passenger Limit

☐ Request

☐ Exhibit

☐ Late-Filed Exhibit

☐ Letter

☐ Proposed Order

☐ Publisher's Affidavit

☐ Reservation Letter

☐ Response

☐ Return to Petitioner

☐ Other: \_\_\_\_\_

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

## REQUEST FOR EXTENSION TO COMPLY WITH ORDER (ORS Rev 3-2-10)

<b>File the original with:</b>  <b>Public Service Commission of South Carolina</b> <b>Clerk's Office</b> <b>Motor Carrier Matters</b> <b>P.O. Box 11549</b> <b>Columbia, S.C. 29211</b> <b>(803) 896 - 5100</b> <b>FAX (803) 896-5199</b>	<b>Mail or fax a copy to:</b>  <b>S.C. Office of Regulatory</b> <b>Transportation Department</b> <b>401 Main Street, Suite 900</b> <b>Columbia, S.C. 201</b> <b>(803) 737 578</b> <b>FAX (803) 737 815</b>
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DATE: 1-9-2015

The S.C. Public Service Commission issued a Certificate of Public Convenience and Necessity in Order # 2014-592 dated 1-9-2015 for the following type of certificate:

☐ Class C Taxi   
 ☐ Class C Charter   
 ☐ Class C Charter Bus   
 ☒ Class C Non-Emergency  
☐ Class C Stretcher Van

Pursuant to that Order, the following carrier was given ninety (90) days from the date of that Order to comply with the requirements of certification.

Please consider this as a request for an extension until 3-31-2015 to allow the following carrier to come into compliance. (DATE)

**EXTENSIONS ARE NOT EFFECTIVE UNTIL APPROVED BY THE PUBLIC SERVICE COMMISSION.**

Master Care Non-Emergency Medical Transportation, LLC

(Name of Company)

D/B/A

(If applicable)

10121 Garners Ferry Rd.

(Street Address)

848 Toms Creek Road, Hopkins, SC 29061

(Mailing Address, City, State, Zip)

Eastover, SC 29044

(City, State, Zip Code)



(Signature)

803-873-0005

(Telephone Number)

Owner

(Title) Owner, President, etc.

## Reason for Request for Extension to comply with PSC order:

I am requesting an extension to comply with order due to have not received an approved contract for operation, which is recommended by insurance company, to obtain commercial liability insurance and was not able to get vehicle imprinted due to it must be at least 50 degrees outside at time of scheduled appointment.